

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Wing</i>		9/19/64
O.I.P.E. CLASSIFIER	<i>S</i>		5926-00
FORMALITY REVIEW		71531	11/6/64
RESPONSE FORMALITY REVIEW			

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INDEX OF CLAIMS

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
— (Through numeral)...	Canceled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Claim	Date
Final	
Original	
1	✓ ✓ ✓ ✓
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21	✓
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25	✓
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28	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here